

**WORKPLACE MANAGED CARE  
TEMPLATE FOR CREATING HR AND HEALTH CARE  
UTILIZATION DATA FILES**

Prepared by

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For the  
Workplace Managed Care Steering Committee

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WORKPLACE HR DATA													
Study_ID	Year	Qtr	Study_Gr	Sex	Race	YOB	MOG	Enrolled	Tenure	Union	OSHA100	OSHA200	Terminated
(Study ID)	(Year)	(Quarter)	(Study Group)	(Sex)	(Race)	(Year of Birth)	(Major Occupational Group)	(Health Plan Enrollment)	(Job Tenure)	(Union Status)	(Number of OSHA 100 claims per quarter)	(Number of OSHA 200 Claims per quarter)	(Termination Status)
1	1995	1	INT1	FEMALE	1	1954	A	HMO1	8	N/A	0	0	NO
1	1995	2	INT1	FEMALE	1	1954	A	HMO1	8	N/A	0	0	NO
1	1995	3	INT1	FEMALE	1	1954	A	HMO2	9	N/A	0	0	NO
1	1995	4	INT1	FEMALE	1	1954	A	HMO2	9	N/A	1	0	NO
2	1995	1	CMP2	MALE	5	1970	K	POS1	0	N	0	0	NO
2	1995	2	CMP2	MALE	5	1970	K	POS1	0	Y	0	1	NO
2	1995	3	CMP2	MALE	5	1970	K	POS1	1	Y	0	0	NO
2	1995	4	CMP2	MALE	5	1970	K	POS1	1	Y	0	0	NO

CLUSTER VARIABLES							
Educat	Earnings	Wcomp_nm	Wcomp_vl	Absentsm	Exempt	Drug_Pos	Drug_Neg
(Education)	(Quarterly Gross Pay)	(Number of Worker's Compensation Claims Paid per Quarter)	(\$\$ Value of Worker's Compensation Claims Paid per Quarter)	(Number of Days Absent per Quarter)	(Exempt/ Nonexempt)	('For Cause' Positive Drug Test Results per Quarter)	('For Cause' Negative Drug Test Results per Quarter)
16	12000	0	0	0	Exempt	0	0
16	12000	0	0	0	Exempt	0	0
16	12000	0	0	15	Exempt	1	0
16	13000	1	1000	15	Exempt	0	0
16	7500	0	0	0	Exempt	0	0
16	7500	1	1500	10	Exempt	0	1
16	7500	0	0	0	Exempt	0	0
16	7500	1	500	12	Exempt	0	0

HEALTH CARE UTILIZATION DATA											
Study_ID	Year	Qtr	Client_ID	Subsc_ID	Relation	YOB	Sex	Marital	Enrolled	ER1_days	ER2_days
(Study ID)	(Year)	(Qtr)	(Client ID)	(Subscriber ID)	(Client's Relation to Subscriber)	(Client's Year of Birth)	(Client's Sex)	(Client's Marital Status)	(Health Plan Enrollment)	(Total Days in which an ER visit with NO admission occurred per quarter)	(Total Days in which an ER visit WITH admission occurred per quarter)
1	1995	1	1000	123	SUBSC	1954	FEMALE	MARRIED	HMO1	0	0
1	1995	2	1000	123	SUBSC	1954	FEMALE	MARRIED	HMO1	0	0
1	1995	3	1000	123	SUBSC	1954	FEMALE	MARRIED	HMO2	0	0
1	1995	4	1000	123	SUBSC	1954	FEMALE	MARRIED	HMO2	1	0
.	1995	1	1001	123	DEPEN1	1980	MALE	SINGLE	HMO1	0	0
.	1995	2	1001	123	DEPEN1	1980	MALE	SINGLE	HMO1	1	0
.	1995	3	1001	123	DEPEN1	1980	MALE	SINGLE	HMO2	0	0
.	1995	4	1001	123	DEPEN1	1980	MALE	SINGLE	HMO2	0	0
17	1995	1	1002	123	SPOUSE	1960	MALE	MARRIED	HMO1	0	0
17	1995	2	1002	123	SPOUSE	1960	MALE	MARRIED	HMO1	2	0
17	1995	3	1002	123	SPOUSE	1960	MALE	MARRIED	HMO2	0	0
17	1995	4	1002	123	SPOUSE	1960	MALE	MARRIED	HMO2	0	0

<b>URG_days</b>	<b>OP_days</b>	<b>IP_adm</b>	<b>IP_stay</b>	<b>SAMH_ER1</b>	<b>SAMH_ER2</b>	<b>SAMH_URG</b>	<b>SAMH_OP</b>
(Total days in which urgent/emergent care visits occurred per quarter)	(No. of total days in which an outpatient visit occurred per quarter)	(Total Number of Inpatient Admissions per quarter)	(Total days of stay in an inpatient facility per quarter)	(No. of total days in which an ER visit with NO admission occurred associated with SA or MH per quarter)	(No. of total days in which an ER visit WITH admission occurred associated with SA or MH per quarter)	(No. of total days in which an Urgent/Emergent Care visit occurred associated with SA or MH per quarter)	(No. of total days in which an outpatient visit occurred associated with SA or MH per quarter)
0	1	0	0	0	0	0	1
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	1	0	0	1	0	0	0
1	0	1	10	0	0	0	0
0	0	0	0	0	0	0	0
0	1	0	0	0	0	0	0
0	1	0	0	0	0	0	0
0	0	1	5	0	0	0	0
0	0	0	0	1	0	0	0
0	1	0	0	0	0	0	1
2	2	0	0	0	0	1	1

<b>SAMH_IPA</b>	<b>SAMH_IPS</b>	<b>SA_ER1</b>	<b>SA_ER2</b>	<b>SA_URG</b>	<b>SA_OP</b>	<b>SA_IPA</b>	<b>SA_IPS</b>
(No. of total inpatient ADMISSIONS associated with SA or MH per quarter)	(No. of total inpatient DAYS OF STAY associated with SA or MH per quarter)	(No. of total days in which an ER visit with NO admission occurred associated with SA but not MH per quarter)	(No. of total days in which an ER visit WITH admission occurred associated with SA but not MH per quarter)	(No. of total days in which an Urgent/Emergent Care visit occurred associated with SA but not MH per quarter)	(No. of total days in which an outpatient visit occurred associated with SA but not MH per quarter)	(No. of total inpatient ADMISSIONS associated with SA but not MH per quarter)	(No. of total inpatient DAYS OF STAY associated with SA but not MH per quarter)
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	1	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0
1	5	0	0	0	0	1	5
0	0	0	0	0	0	0	0
0	0	0	0	0	1	0	0
0	0	0	0	0	0	0	0

<b>MH_ER1</b>	<b>MH_ER2</b>	<b>MH_URG</b>	<b>MH_OP</b>	<b>MH_IPS</b>	<b>MH_IPA</b>
(No. of total days in which an ER visit with NO admission occurred associated with MH but not SA per quarter)	(No. of total days in which an ER visit WITH admission occurred associated with MH but not SA per quarter)	(No. of total days in which an Urgent/Emergent Care visit occurred associated with MH but not SA per quarter)	(No. of total days in which an outpatient visit occurred associated with MH but not SA per quarter)	(No. of total inpatient DAYS OF STAY associated with MH but not SA per quarter)	(No. of total inpatient ADMISSIONS associated with MH but not SA per quarter)
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	1	0	0

HEALTH CARE COST DATA									
Study_ID	Year	Qtr	Client_ID	Subsc_ID	Relation	ER1_chgs	ER1_co-pay	ER1_paid	ER1_allowed
(Study ID)	(Year)	(Qtr)	(Client ID)	(Subscriber ID)	(Client's Relation to Subscriber)	(Total charges associated with ER visits with NO admission per quarter)	(Total co-pay associated with ER visits with NO admission per quarter)	(Total paid amount associated with ER visits with NO admission per quarter)	(Total allowed associated with ER visits with NO admission per quarter)
1	1995	1	1000	123	SUBSC	.	0	0	0
1	1995	2	1000	123	SUBSC	.	0	0	0
1	1995	3	1000	123	SUBSC	.	0	0	0
1	1995	4	1000	123	SUBSC	.	15	500	500
.	1995	1	1001	123	DEPEN1	.	0	0	0
.	1995	2	1001	123	DEPEN1	.	15	1000	1000
.	1995	3	1001	123	DEPEN1	.	0	0	0
.	1995	4	1001	123	DEPEN1	.	0	0	0
17	1995	1	1002	123	SPOUSE	.	0	0	0
17	1995	2	1002	123	SPOUSE	.	30	750	750
17	1995	3	1002	123	SPOUSE	.	0	0	0
17	1995	4	1002	123	SPOUSE	.	0	0	0

<b>ER2_chgs</b>	<b>ER2_co-pay</b>	<b>ER2_paid</b>	<b>ER2_allowed</b>	<b>URG_charges</b>	<b>URG_co-pay</b>	<b>URG_paid</b>	<b>URG_allowed</b>
<b>(Total charges associated with ER visits WITH admission per quarter)</b>	<b>(Total co-pay associated with ER visits WITH admission per quarter)</b>	<b>(Total paid amount associated with ER visits WITH admission per quarter)</b>	<b>(Total allowed associated with ER visits WITH admission per quarter)</b>	<b>(Total Charges Associated with Urgent/Emergent Care visits per quarter)</b>	<b>(Total Co-Pay Associated with Urgent/Emergent Care visits per quarter)</b>	<b>(Total Costs Paid Associated with Urgent/Emergent Care visits per quarter)</b>	<b>(Total Costs Allowed Associated with Urgent/Emergent Care visits per quarter)</b>
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	20	150	150
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	40	230	230

<b>OP_charges</b>	<b>OP_co-pay</b>	<b>OP_paid</b>	<b>OP_allowed</b>	<b>IP_charges</b>	<b>IP_co-pay</b>	<b>IP_paid</b>	<b>IP_allowed</b>
(Total Days in which an Outpatient Visit occurred per quarter)	(Total Co-Pay Associated with Outpatient Visits per quarter)	(Total Costs Paid Associated with Outpatient Visits per quarter)	(Total Costs Allowed Associated with Outpatient Visits per quarter)	(Total Charges Associated with Inpatient Stays per quarter)	(Total Co_pay Associated with Inpatient Stays per quarter)	(Total Costs Paid Associated with Inpatient Stays per quarter)	(Total Costs Allowed Associated with Inpatient Stays per quarter)
.	10	100	100	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	10	150	150	.	.	0	0
.	0	0	0	.	.	4500	5000
.	0	0	0	.	.	0	0
.	0	50	50	.	.	0	0
.	10	75	75	.	.	0	0
.	0	0	0	.	.	2500	2500
.	0	0	0	.	.	0	0
.	10	140	140	.	.	0	0
.	20	200	200	.	.	0	0

<b>SAMER1_chgs</b>	<b>SAMER1_copay</b>	<b>SAMER1_paid</b>	<b>SAMER1_allow</b>	<b>SAMER2_chgs</b>	<b>SAMER2_copay</b>	<b>SAMER2_paid</b>	<b>SAMER2_allow</b>
<b>(Total Charges Associated with ER visits with NO admission and related to SA or MH per quarter)</b>	<b>(Total Co-pay Associated with ER visits with NO admission and related to SA or MH per quarter)</b>	<b>(Total Costs Paid Associated with ER visits with NO admission and related to SA or MH per quarter)</b>	<b>(Total Costs Allowed Associated with ER visits with NO admission and related to SA or MH per quarter)</b>	<b>(Total Charges Associated with ER visits WITH admission and related to SA or MH per quarter)</b>	<b>(Total Co-pay Associated with ER visits WITH admission and related to SA or MH per quarter)</b>	<b>(Total Costs Paid Associated with ER visits WITH admission and related to SA or MH per quarter)</b>	<b>(Total Costs Allowed Associated with ER visits WITH admission and related to SA or MH per quarter)</b>
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	15	500	500	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	15	450	450	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0

<b>SAMURG_chgs</b>	<b>SAMURG_copay</b>	<b>SAMURG_paid</b>	<b>SAMURG_allow</b>	<b>SAMOP_chgs</b>	<b>SAMOP_copay</b>	<b>SAMOP_paid</b>	<b>SAMOP_allow</b>
(Total Charges Associated with Urgent/Emergent Care visits that are related to SA or MH per quarter)	(Total Co-pay Associated with Urgent/Emergent Care visits that are related to SA or MH per quarter)	(Total Costs Paid Associated with Urgent/Emergent Care visits that are related to SA or MH per quarter)	(Total Costs Allowed Associated with Urgent/Emergent Care visits that are related to SA or MH per quarter)	(Total Charges Associated with Outpatient Visits that are related to SA or MH per quarter)	(Total Co-pay Associated with Outpatient Visits that are related to SA or MH per quarter)	(Total Costs Paid Associated with Outpatient Visits that are related to SA or MH per quarter)	(Total Costs Allowed Associated with Outpatient Visits that are related to SA or MH per quarter)
.	0	0	0	.	10	100	100
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	10	140	140
.	20	150	150	.	10	100	100

<b>SAMIP_chgs</b>	<b>SAMIP_copay</b>	<b>SAMIP_paid</b>	<b>SAMIP_allow</b>	<b>SA_ER1_chgs</b>	<b>SA_ER1_copay</b>	<b>SA_ER1_paid</b>	<b>SA_ER1_allow</b>
(Total Charges Associated with Inpatient Stays that are related to SA or MH per quarter)	(Total Co-pay Associated with Inpatient Stays that are related to SA or MH per quarter)	(Total Costs Paid Associated with Inpatient Stays that are related to SA or MH per quarter)	(Total Costs Allowed Associated with Inpatient Stays that are related to SA or MH per quarter)	(Total Charges Associated with ER visits with NO admission and related to SA -but not MH- per quarter)	(Total Co-pay Associated with ER visits with NO admission and related to SA -but not MH- per quarter)	(Total Costs Paid Associated with ER visits with NO admission and related to SA -but not MH- per quarter)	(Total Costs Allowed Associated with ER visits with NO admission and related to SA -but not MH- per quarter)
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	50	1000	1000
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	2500	2500	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0
.	.	0	0	.	0	0	0

SA_ER2_chgs	SA_ER2_copay	SA_ER2_paid	SA_ER2_allow	SA_URG_chgs	SA_URG_copay	SA_URG_paid	SA_URG_allow
(Total Charges Associated with ER visits WITH admission and related to SA -but not MH- per quarter)	(Total Co-pay Associated with ER visits WITH admission and related to SA or MH per quarter)	(Total Costs Paid Associated with ER visits WITH admission and related to SA -but not MH- per quarter)	(Total Costs Allowed Associated with ER visits WITH admission and related to SA -but not MH- per quarter)	(Total Charges Associated with Urgent/Emergent Care visits that are related to SA -but not MH- per quarter)	(Total Co-pay Associated with Urgent/Emergent Care visits that are related to SA -but not MH- per quarter)	(Total Costs Paid Associated with Urgent/Emergent Care visits that are related to SA -but not MH- per quarter)	(Total Costs Allowed Associated with Urgent/Emergent Care visits that are related to SA -but not MH- per quarter)
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0

<b>SA_OP_chgs</b>	<b>SA_OP_copay</b>	<b>SA_OP_paid</b>	<b>SA_OP_allow</b>	<b>SA_IP_chgs</b>	<b>SA_IP_copay</b>	<b>SA_IP_paid</b>	<b>SA_IP_allow</b>
<b>(Total Charges Associated with Outpatient Visits that are related to SA -but not MH-per quarter)</b>	<b>(Total Co-pay Associated with Outpatient Visits that are related to SA -but not MH- per quarter)</b>	<b>(Total Costs Paid Associated with Outpatient Visits that are related to SA -but not MH- per quarter)</b>	<b>(Total Costs Allowed Associated with Outpatient Visits that are related to SA -but not MH-per quarter)</b>	<b>(Total Charges Associated with Inpatient Stays that are related to SA - but not MH- per quarter)</b>	<b>(Total Co-pay Associated with Inpatient Stays that are related to SA - but not MH- per quarter)</b>	<b>(Total Costs Paid Associated with Inpatient Stays that are related to SA - but not MH- per quarter)</b>	<b>(Total Costs Allowed Associated with Inpatient Stays that are related to SA -but not MH-per quarter)</b>
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	0	0
.	0	0	0	.	.	2500	2500
.	0	0	0	.	.	0	0
.	10	140	140	.	.	0	0
.	0	0	0	.	.	0	0

<b>MH_ER1_chgs</b>	<b>MH_ER1_copay</b>	<b>MH_ER1_paid</b>	<b>MH_ER1_allow</b>	<b>MH_ER2_chgs</b>	<b>MH_ER2_copay</b>	<b>MH_ER2_paid</b>	<b>MH_ER2_allow</b>
(Total Charges Associated with ER visits with NO admission and related to MH -but not SA- per quarter)	(Total Co-pay Associated with ER visits with NO admission and related to MH -but not SA- per quarter)	(Total Costs Paid Associated with ER visits with NO admission and related to MH -but not SA- per quarter)	(Total Costs Allowed Associated with ER visits with NO admission and related to MH -but not SA- per quarter)	(Total Charges Associated with ER visits WITH admission and related to MH -but not SA- per quarter)	(Total Co-pay Associated with ER visits WITH admission and related to MH or SA per quarter)	(Total Costs Paid Associated with ER visits WITH admission and related to MH -but not SA- per quarter)	(Total Costs Allowed Associated with ER visits WITH admission and related to MH -but not SA- per quarter)
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0

<b>MH_URG_chgs</b>	<b>MH_URG_copay</b>	<b>MH_URG_paid</b>	<b>MH_URG_allow</b>	<b>MH_OP_chgs</b>	<b>MH_OP_copay</b>	<b>MH_OP_paid</b>	<b>MH_OP_allow</b>
(Total Charges Associated with Urgent/Emergent Care visits that are related to MH -but not SA- per quarter)	(Total Co-pay Associated with Urgent/Emergent Care visits that are related to MH -but not SA- per quarter)	(Total Costs Paid Associated with Urgent/Emergent Care visits that are related to MH -but not SA- per quarter)	(Total Costs Allowed Associated with Urgent/Emergent Care visits that are related to MH -but not SA- per quarter)	(Total Charges Associated with Outpatient Visits that are related to MH -but not SA-per quarter)	(Total Co-pay Associated with Outpatient Visits that are related to MH -but not SA- per quarter)	(Total Costs Paid Associated with Outpatient Visits that are related to MH -but not SA- per quarter)	(Total Costs Allowed Associated with Outpatient Visits that are related to MH -but not SA-per quarter)
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	0	0	0
.	0	0	0	.	10	100	100

<b>MH_IP_chgs</b>	<b>MH_IP_copay</b>	<b>MH_IP_paid</b>	<b>MH_IP_allow</b>
(Total Charges Associated with Inpatient Stays that are related to MH - but not SA- per quarter)	(Total Co-pay Associated with Inpatient Stays that are related to MH - but not SA- per quarter)	(Total Costs Paid Associated with Inpatient Stays that are related to MH - but not SA- per quarter)	(Total Costs Allowed Associated with Inpatient Stays that are related to MH -but not SA-per quarter)
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0
.	0	0	0